

PART B—ISSUE FEE TRANSMITTAL

242-64500

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SHORS
THE FINANCIAL CENTER
666 WALNUT STREET SUITE 2500
DES MOINES IA 50309

2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME

Street Address

City, State and Zip Code

CO-INVENTOR'S NAME

Street Address

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APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/402,199	03/10/95	017	COSIMANO, E	2414 01/14/97
First Named Applicant	RYAN, MICHAEL C.			

TITLE OF FLUID DELIVERY CONTROL NOZZLE INVENTION

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
2	7026320/6610	364-510.000	I47	UTILITY	YES \$645.00	04/14/97

3. Correspondence address change (Complete only if there is a change)

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1 Kent A. Herink
2 Brian J. Laurenzo
3 Michael C. Gilchrist

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE:

(2) ADDRESS: (CITY & STATE OR COUNTRY)

A. ☒ This application is NOT assigned.

- ☐ Assignment previously submitted to the Patent and Trademark Office.
☐ Assignment is being submitted under separate cover. Assignment should be directed to Box ASSIGNMENTS.

PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

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☒ Issue Fee ☐ Advance Order - # of Copies _____

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The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

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I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

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Brian J. Laurenzo (Name of person making deposit)

Brian J. Laurenzo (Signature)

4/11/97 (Date)

1. TRANSMIT THIS FORM WITH FEE